## Case 22-10384-JCM Doc 39 Filed 09/28/23 Entered 09/28/23 11:22:01 Desc Main Document Page 1 of 4

	in this information to id	, <u>, , , , , , , , , , , , , , , , , , </u>									
De	btor 1 B	arry Scott	Stollberg			_					
1 -	btor 2					_					
Un	ited States Bankruptcy	Court for the	: WESTERN DISTRICT	OF PENNSYLVAN	IA						
Ca	se number 22-103	384					Chec	k if this is	:		
(If k	nown)							n amende	ed filing		
L										postpetition llowing date:	•
<u>O</u>	fficial Form 1	<u>061</u>					Ī	MM / DD/ \	YYYY		
S	chedule I: Yo	our Inc	ome								12/1
atta Pa	rt 1: Describe En	this form.	r spouse is not filing wi On the top of any addition								
<ol> <li>Fill in your employment information.</li> </ol>				Debtor 1				Debtor 2 or non-filing spouse			
	If you have more than		Employment status	☐ Employed				☐ Employed			
	attach a separate page with information about additional employers.		. ,	■ Not employed				☐ Not employed			
			Occupation								
	Include part-time, sea self-employed work.	asonal, or	Employer's name								
	Occupation may inclu or homemaker, if it ap		Employer's address								
			How long employed th	nere?				_			
Pa	rt 2: Give Details	s About Mor	nthly Income								
spo	use unless you are sep	arated.	ate you file this form. If you							-	
	e space, attach a separ					•	•				•
							For De	btor 1		otor 2 or ng spouse	
2.			ry, and commissions (becalculate what the monthly		2.	\$		0.00	\$	N/A	-
3.	Estimate and list mo	onthly overt	ime pay.		3.	+\$		0.00	+\$	N/A	-
4.	Calculate gross Inco	ome. Add lir	ne 2 + line 3.		4.	\$		0.00	\$	N/A	

Debt	tor 1	Barry Scott Stollberg	_	Cas	se number (if known)	22-10384			
			_						
				For Debtor 1		For Debtor 2 or non-filing spouse			
	Cor	by line 4 here	4.	\$	0.00	\$	N/A		
	•	,				·		-	
5.	List	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	N/A		
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	N/A	-	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N/A	-	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A	_	
	5e.	Insurance	5e.	\$	0.00	\$	N/A		
	5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A	_	
	5g.	Union dues	5g.	\$	0.00	\$	N/A	_	
	5h.	Other deductions. Specify:	5h	+ \$	0.00	+ \$	N/A	=	
6.		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$	N/A	-	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00	\$	N/A	_	
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total	90	¢	0.00	<b>c</b>	NI/A		
	8b.	monthly net income.  Interest and dividends	8a. 8b.	\$ \$	0.00	\$ \$	N/A	_	
	8c.	Family support payments that you, a non-filing spouse, or a dependent		Φ	0.00	Φ	N/A	-	
	ос.	regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	N/A		
	8d.	Unemployment compensation	8d.	\$	2,288.10	\$	N/A	_	
	8e.	Social Security	8e.	\$	0.00	\$	N/A	_	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	e 8f.	\$	0.00	\$	N/A		
	8g.	Pension or retirement income	8g.	\$	0.00	\$	N/A	-	
	8h.	Other monthly income. Specify:	8h	+ \$	0.00	+ \$	N/A	_	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	2,288.10	\$	N/A	A	
4.5			[				1 6		
10.		culate monthly income. Add line 7 + line 9.  I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		2,288.10 + \$	N/A	_ = \$	2,288.10	
11.	1. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.  Specify:  11. +\$ 0.00								
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.  Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  12. \$								2,288.10	
							Combin		
13.	Do	you expect an increase or decrease within the year after you file this form	?				monthly	y income	
		No.						1	
		Yes. Explain:							

Fill	in this informa	tion to identify yo	our case:									
Deb	Barry Scott Stollberg						Check if this is:  ■ An amended filing					
	tor 2 ouse, if filing)					ving postpetition chapter the following date:						
Unit	ed States Bankr	untcy Court for the	: WESTE	ERN DISTRICT OF PENNS	SYI VANIA		MM / DD / YYYY					
		2-10384			, 22 ,							
	nown)	-10304										
		rm 106J										
		J: Your						12/15				
info	rmation. If m		eded, atta	If two married people ar ch another sheet to this n.								
Par		ibe Your House	ehold									
1.	Is this a join No. Go to											
			in a separ	ate household?								
	□ N	0										
	☐ Ye	es. Debtor 2 mus	st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Debto	or 2.					
2.	Do you have dependents? ■ No											
	Do not list De Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debto		Dependent's age	Does dependent live with you?				
	Do not state dependents							□ No				
	dependents	names.						☐ Yes ☐ No				
								Yes				
								□ No				
								☐ Yes ☐ No				
								☐ Yes				
3.	expenses of	enses include f people other t d your depende	han $_{\square}$	No Yes								
exp	imate your ex		our bankr	y Expenses uptcy filing date unless y y is filed. If this is a supp								
the		n assistance an		government assistance it luded it on <i>Schedule I:</i> Y			Your exp	enses				
4.		or home owners		ses for your residence. In	nclude first mortgage	e 4. \$		975.00				
	If not includ	led in line 4:										
	4a. Real e	estate taxes				4a. \$		0.00				
		rty, homeowner's	s, or renter	's insurance		4b. \$		30.00				
			•	ıpkeep expenses		4c. \$		0.00				
F		owner's associat			mo oquita lacara	4d. \$		0.00				
5.	Additional n	nortgage paym	ents for yo	our residence, such as ho	me equity loans	5. \$		0.00				

Debtor 1 _I	Barry Scott Stollberg	Case number (if known)	22-10384
6. Utilitie	s:		
	Electricity, heat, natural gas	6a. \$	120.00
	Water, sewer, garbage collection	6b. \$	30.00
	Telephone, cell phone, Internet, satellite, and cable services	6c. \$	90.00
	Other. Specify:	6d. \$	0.00
	and housekeeping supplies	7. \$	450.00
	are and children's education costs	8. \$	0.00
	ng, laundry, and dry cleaning	9. \$	50.00
	nal care products and services	10. \$	75.00
	al and dental expenses	11. \$	
	portation. Include gas, maintenance, bus or train fare.	Π. φ	120.00
	include car payments.	12. \$	120.00
	ainment, clubs, recreation, newspapers, magazines, and books	13. \$	50.00
	able contributions and religious donations	14. \$	0.00
Insura	•	· · · · · · · · · · · · · · · · · · ·	0.00
	include insurance deducted from your pay or included in lines 4 or 20.		
	Life insurance	15a. \$	0.00
15b. I	Health insurance	15b. \$	0.00
	Vehicle insurance	15c. \$	150.00
	Other insurance. Specify:	15d. \$	0.00
	Do not include taxes deducted from your pay or included in lines 4 or 20.		0.00
Specify		16. \$	0.00
	ment or lease payments:	·	
	Car payments for Vehicle 1	17a. \$	0.00
	Car payments for Vehicle 2	17b. \$	0.00
17c. (	Other. Specify:	17c. \$	0.00
	Other. Specify:	17d. \$	0.00
	payments of alimony, maintenance, and support that you did not report		
	ted from your pay on line 5, Schedule I, Your Income (Official Form 106)		0.00
	payments you make to support others who do not live with you.	\$	0.00
Specify	y:	19.	
. Other	real property expenses not included in lines 4 or 5 of this form or on Sc	hedule I: Your Income.	
20a. I	Mortgages on other property	20a. \$	0.00
20b. I	Real estate taxes	20b. \$	0.00
20c. I	Property, homeowner's, or renter's insurance	20c. \$	0.00
20d. I	Maintenance, repair, and upkeep expenses	20d. \$	0.00
20e. I	Homeowner's association or condominium dues	20e. \$	0.00
. Other:	Specify: Pet Supplies	21. +\$	25.00
	· · · — · · · · · · · · · · · · · · · ·		
	ate your monthly expenses		
	dd lines 4 through 21.	\$	2,285.00
22b. C	opy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	2   \$	
22c. Ad	dd line 22a and 22b. The result is your monthly expenses.	\$	2,285.00
Colord	ate your menthly not income		· · · · · · · · · · · · · · · · · · ·
	late your monthly net income.	22a •	0.000.40
	Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	2,288.10
236. (	Copy your monthly expenses from line 22c above.	23b\$	2,285.00
00 - 4	Out the section of th		
	Subtract your monthly expenses from your monthly income.	23c. \$	3.10
	The result is your monthly net income.	200. μ	3.10
24. <b>Do yo</b> ı For exa	u expect an increase or decrease in your expenses within the year after mple, do you expect to finish paying for your car loan within the year or do you expect yeation to the terms of your mortgage?	you file this form?	ease or de
П Уес	Explain here:		